

# FEDERAL ASSISTANCE

2. DATE SUBMITTED

Applicant Identifier

1. TYPE OF SUBMISSION:

Application

☐ Construction

☒ Non-Construction

Preapplication

☐ Construction

☐ Non-Construction

3. DATE RECEIVED BY STATE

State Application Identifier

4. DATE RECEIVED BY FEDERAL AGENCY

Federal Identifier

5. APPLICANT INFORMATION

Legal Name:

City of Elgin

Organizational Unit:

Address (give city, county, state, and zip code):

P.O. Box 128

Elgin, OR 97827

Name and telephone number of the person to be contacted on matters involving this application (give area code)

Joe Garlitz  
503 437-2253 Voice & Fax

6. EMPLOYER IDENTIFICATION NUMBER (EIN):

93-6002155

8. TYPE OF APPLICATION:

☒ New

☐ Continuation

☐ Revision

If Revision, enter appropriate letter(s) in box(es):

A. Increase Award

B. Decrease Award

C. Increase Duration

D. Decrease Duration Other (specify):

7. TYPE OF APPLICANT: (enter appropriate letter in box)

A. State

B. County

☒ C. Municipal

D. Township

E. Interstate

F. Intermunicipal

G. Special District

H. Independent School Dist.

I. State Controlled Institution of Higher Learning

J. Private University

K. Indian Tribe

L. Individual

M. Profit Organization

N. Other (Specify):

9. NAME OF FEDERAL AGENCY:

NF Coordinator: Chris Kelsey, WAW

10. CATALOG OF FEDERAL DOMESTIC ASSISTANCE NUMBER:

10-670

TITLE:

National Forest Dependent Rural Communities

11. DESCRIPTIVE TITLE OF APPLICANT'S PROJECT:

Funding to complete feasibility study for Elgin Industrial Park including engineering study, industry analysis and marketing plan.

12. AREAS AFFECTED BY PROJECT (cities, counties, states, etc.):

Union County Area

13. PROPOSED PROJECT:

Start Date

Ending Date

09/15/94

09/30/95

14. CONGRESSIONAL DISTRICTS OF:

a. Applicant

Second

b. Project

Second

15. ESTIMATED FUNDING:

|                   |    |        |     |
|-------------------|----|--------|-----|
| a. Federal        | \$ | 12,900 | .00 |
| b. Applicant      | \$ | 3,530  | .00 |
| c. State          | \$ |        | .00 |
| d. Local          | \$ |        | .00 |
| e. Other          | \$ |        | .00 |
| f. Program Income | \$ |        | .00 |
| g. TOTAL          | \$ | 16,430 | .00 |

16. IS APPLICATION SUBJECT TO REVIEW BY STATE EXECUTIVE ORDER 12372 PROCESS?

a. YES. THIS PREAPPLICATION/APPLICATION WAS MADE AVAILABLE TO THE STATE EXECUTIVE ORDER 12372 PROCESS FOR REVIEW ON.

DATE

b. NO. ☐ PROGRAM IS NOT COVERED BY E.O. 12372

☐ OR PROGRAM HAS NOT BEEN SELECTED BY STATE FOR REVIEW

17. IS THE APPLICANT DELINQUENT ON ANY FEDERAL DEBT?

☐ Yes If "Yes," attach an explanation.

☒ No

18. TO THE BEST OF MY KNOWLEDGE AND BELIEF, ALL DATA IN THIS APPLICATION/PREAPPLICATION ARE TRUE AND CORRECT, THE DOCUMENT HAS BEEN DULY AUTHORIZED BY THE GOVERNING BODY OF THE APPLICANT AND THE APPLICANT WILL COMPLY WITH THE ATTACHED ASSURANCES IF THE ASSISTANCE IS AWARDED

a. Typed Name of Authorized Representative

Randy L. McKone

b. Title

Mayor

c. Telephone number

437-2253

d. Signature of Authorized Representative

Randy L. McKone

e. Date Signed

9/8/94

Previous Editions Not Usable

Standard Form 424 (REV 4-88)  
Prescribed by OMB Circular A-102

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## INSTRUCTIONS FOR THE SF 424

This is a standard form used by applicants as a required facesheet for preapplications and applications submitted for Federal assistance. It will be used by Federal agencies to obtain applicant certification that States which have established a review and comment procedure in response to Executive Order 12372 and have selected the program to be included in their process, have been given an opportunity to review the applicant's submission.

- | Item:                                                                                                                                                                                                                                                                                                                                                                                             | Entry: | Item:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Entry: |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|
| 1. Self-explanatory.                                                                                                                                                                                                                                                                                                                                                                              |        | 12. List only the largest political entities affected (e.g., State, counties, cities).                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |        |
| 2. Date application submitted to Federal agency (or State if applicable) & applicant's control number (if applicable).                                                                                                                                                                                                                                                                            |        | 13. Self-explanatory.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |        |
| 3. State use only (if applicable).                                                                                                                                                                                                                                                                                                                                                                |        | 14. List the applicant's Congressional District and any District(s) affected by the program or project.                                                                                                                                                                                                                                                                                                                                                                                                                                                  |        |
| 4. If this application is to continue or revise an existing award, enter present Federal identifier number. If for a new project, leave blank.                                                                                                                                                                                                                                                    |        | 15. Amount requested or to be contributed during the first funding/budget period by each contributor. Value of in-kind contributions should be included on appropriate lines as applicable. If the action will result in a dollar change to an existing award, indicate <u>only</u> the amount of the change. For decreases, enclose the amounts in parentheses. If both basic and supplemental amounts are included, show breakdown on an attached sheet. For multiple program funding, use totals and show breakdown using same categories as item 15. |        |
| 5. Legal name of applicant, name of primary organizational unit which will undertake the assistance activity, complete address of the applicant, and name and telephone number of the person to contact on matters related to this application.                                                                                                                                                   |        | 16. Applicants should contact the State Single Point of Contact (SPOC) for Federal Executive Order 12372 to determine whether the application is subject to the State intergovernmental review process.                                                                                                                                                                                                                                                                                                                                                  |        |
| 6. Enter Employer Identification Number (EIN) as assigned by the Internal Revenue Service.                                                                                                                                                                                                                                                                                                        |        | 17. This question applies to the applicant organization, not the person who signs as the authorized representative. Categories of debt include delinquent audit disallowances, loans and taxes.                                                                                                                                                                                                                                                                                                                                                          |        |
| 7. Enter the appropriate letter in the space provided.                                                                                                                                                                                                                                                                                                                                            |        | 18. To be signed by the authorized representative of the applicant. A copy of the governing body's authorization for you to sign this application as official representative must be on file in the applicant's office. (Certain Federal agencies may require that this authorization be submitted as part of the application.)                                                                                                                                                                                                                          |        |
| 8. Check appropriate box and enter appropriate letter(s) in the space(s) provided:<br>— "New" means a new assistance award.<br>— "Continuation" means an extension for an additional funding/budget period for a project with a projected completion date.<br>— "Revision" means any change in the Federal Government's financial obligation or contingent liability from an existing obligation. |        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |        |
| 9. Name of Federal agency from which assistance is being requested with this application.                                                                                                                                                                                                                                                                                                         |        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |        |
| 10. Use the Catalog of Federal Domestic Assistance number and title of the program under which assistance is requested.                                                                                                                                                                                                                                                                           |        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |        |
| 11. Enter a brief descriptive title of the project. If more than one program is involved, you should append an explanation on a separate sheet. If appropriate (e.g., construction or real property projects), attach a map showing project location. For preapplications, use a separate sheet to provide a summary description of this project.                                                 |        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |        |



# BUDGET INFORMATION — Non-Construction Programs

OMB Approval No. 0348-0044

## SECTION A — BUDGET SUMMARY

| Grant Program Function or Activity (a) | Catalog of Federal Domestic Assistance Number (b) | Estimated Unobligated Funds |                 | New or Revised Budget |                 |           |
|----------------------------------------|---------------------------------------------------|-----------------------------|-----------------|-----------------------|-----------------|-----------|
|                                        |                                                   | Federal (c)                 | Non-Federal (d) | Federal (e)           | Non-Federal (f) | Total (g) |
| Forest Service                         |                                                   | \$                          | \$              | \$ 12,900             | \$ 3,530        | \$ 12,900 |
| City                                   |                                                   |                             |                 |                       |                 | 3,530     |
|                                        |                                                   |                             |                 |                       |                 |           |
|                                        |                                                   |                             |                 |                       |                 |           |
| TOTALS                                 |                                                   | \$                          | \$              | \$ 12,900             | \$ 3,530        | \$ 16,430 |

## SECTION B — BUDGET CATEGORIES

| Object Class Categories                  | GRANT PROGRAM, FUNCTION OR ACTIVITY |          |     |     |  | Total (5) |
|------------------------------------------|-------------------------------------|----------|-----|-----|--|-----------|
|                                          | (1) Forest Service                  | (2) City | (3) | (4) |  |           |
| a. Personnel                             | \$                                  | \$ 2,530 | \$  | \$  |  | \$ 2,530  |
| b. Fringe Benefits                       |                                     |          |     |     |  |           |
| c. Travel                                |                                     |          |     |     |  |           |
| d. Equipment                             |                                     |          |     |     |  |           |
| e. Supplies                              |                                     |          |     |     |  |           |
| f. Contractual                           | 12,900                              | 1,000    |     |     |  | 13,900    |
| g. Construction                          |                                     |          |     |     |  |           |
| h. Other                                 |                                     |          |     |     |  |           |
| i. Total Direct Charges (sum of 6a - 6h) | 12,900                              | 3,530    |     |     |  | 16,430    |
| j. Indirect Charges                      |                                     |          |     |     |  |           |
| k. TOTALS (sum of 6i and 6j)             | \$ 12,900                           | \$ 3,530 | \$  | \$  |  | \$ 16,430 |
| Program Income                           | \$                                  | \$       | \$  | \$  |  | \$        |

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### SECTION C - NON-FEDERAL RESOURCES

|                                    | (a) Grant Program | (b) Applicant | (c) State | (d) Other Sources | (e) TOTALS |
|------------------------------------|-------------------|---------------|-----------|-------------------|------------|
| 8.                                 |                   | \$            | \$        | \$                | \$         |
| 9.                                 |                   |               |           |                   |            |
| 10.                                |                   |               |           |                   |            |
| 11.                                |                   |               |           |                   |            |
| 12. TOTALS (sum of lines 8 and 11) |                   | \$            | \$        | \$                | \$         |

### SECTION D - FORECASTED CASH NEEDS

|                                    | Total for 1st Year | 1st Quarter | 2nd Quarter | 3rd Quarter | 4th Quarter |
|------------------------------------|--------------------|-------------|-------------|-------------|-------------|
| 13. Federal                        | \$                 | \$          | \$          | \$          | \$          |
| 14. NonFederal                     |                    |             |             |             |             |
| 15. TOTAL (sum of lines 13 and 14) | \$                 | \$          | \$          | \$          | \$          |

### SECTION E - BUDGET ESTIMATES OF FEDERAL FUNDS NEEDED FOR BALANCE OF THE PROJECT

|                                   | (a) Grant Program | FUTURE FUNDING PERIODS (Years) |            |           |            |
|-----------------------------------|-------------------|--------------------------------|------------|-----------|------------|
|                                   |                   | (b) First                      | (c) Second | (d) Third | (e) Fourth |
| 16.                               |                   | \$                             | \$         | \$        | \$         |
| 17.                               |                   |                                |            |           |            |
| 18.                               |                   |                                |            |           |            |
| 19.                               |                   |                                |            |           |            |
| 20. TOTALS (sum of lines 16 - 19) |                   | \$                             | \$         | \$        | \$         |

### SECTION F - OTHER BUDGET INFORMATION

(Attach additional Sheets if Necessary)

21. Direct Charges:

22. Indirect Charges:

23. Remarks



## ASSURANCES — NON-CONSTRUCTION PROGRAMS

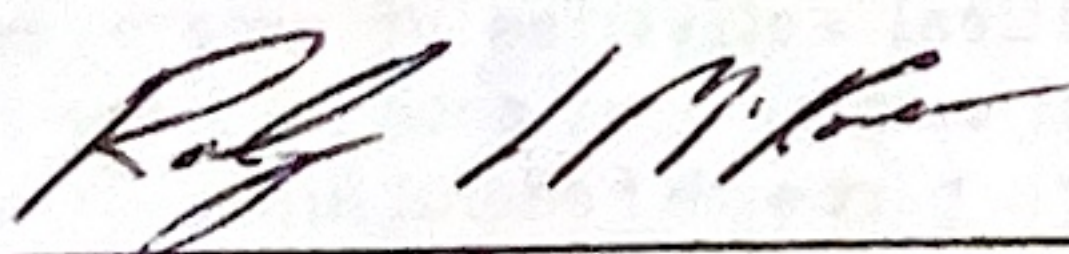
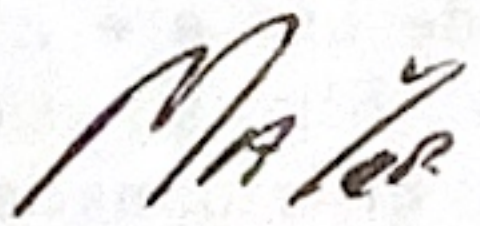
**Note:** Certain of these assurances may not be applicable to your project or program. If you have questions, please contact the awarding agency. Further, certain Federal awarding agencies may require applicants to certify to additional assurances. If such is the case, you will be notified.

As the duly authorized representative of the applicant I certify that the applicant:

1. Has the legal authority to apply for Federal assistance, and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project costs) to ensure proper planning, management and completion of the project described in this application.
2. Will give the awarding agency, the Comptroller General of the United States, and if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives.
3. Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.
4. Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency.
5. Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. §§ 4728-4763) relating to prescribed standards for merit systems for programs funded under one of the nineteen statutes or regulations specified in Appendix A of OPM's Standards for a Merit System of Personnel Administration (5 C.F.R. 900, Subpart F).
6. Will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. §§ 1681-1683, and 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. § 794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C. §§ 6101-6107), which prohibits discrimination on the basis of age; (e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism; (g) §§ 523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. 290 dd-3 and 290 ee-3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Act of 1968 (42 U.S.C. § 3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the specific statute(s) under which application for Federal assistance is being made; and (j) the requirements of any other nondiscrimination statute(s) which may apply to the application.
7. Will comply, or has already complied, with the requirements of Titles II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal or federally assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of Federal participation in purchases.
8. Will comply with the provisions of the Hatch Act (5 U.S.C. §§ 1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds.
9. Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C. §§ 276a to 276a-7), the Copeland Act (40 U.S.C. § 276c and 18 U.S.C. § 874), and the Contract Work Hours and Safety Standards Act (40 U.S.C. §§ 327-333), regarding labor standards for federally assisted construction subagreements.



10. Will comply, if applicable, with flood insurance purchase requirements of Section 102(a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition is \$10,000 or more.
11. Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (P.L. 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetlands pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under the Coastal Zone Management Act of 1972 (16 U.S.C. §§ 1451 et seq.); (f) conformity of Federal actions to State (Clear Air) Implementation Plans under Section 176(c) of the Clear Air Act of 1955, as amended (42 U.S.C. § 7401 et seq.); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended, (P.L. 93-523); and (h) protection of endangered species under the Endangered Species Act of 1973, as amended, (P.L. 93-205).
12. Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. §§ 1271 et seq.) related to protecting components or potential components of the national wild and scenic rivers system.
13. Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. 470), EO 11593 (identification and protection of historic properties), and the Archaeological and Historic Preservation Act of 1974 (16 U.S.C. 469a-1 et seq.).
14. Will comply with P.L. 93-348 regarding the protection of human subjects involved in research, development, and related activities supported by this award of assistance.
15. Will comply with the Laboratory Animal Welfare Act of 1966 (P.L. 89-544, as amended, 7 U.S.C. 2131 et seq.) pertaining to the care, handling, and treatment of warm blooded animals held for research, teaching, or other activities supported by this award of assistance.
16. Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. §§ 4801 et seq.) which prohibits the use of lead based paint in construction or rehabilitation of residence structures.
17. Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act of 1984.
18. Will comply with all applicable requirements of all other Federal laws, executive orders, regulations and policies governing this program.

|                                                                                                                                    |                                                                                                |
|------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------|
| SIGNATURE OF AUTHORIZED CERTIFYING OFFICIAL<br> | TITLE<br> |
| APPLICANT ORGANIZATION<br><br>CITY OF ELGIN                                                                                        | DATE SUBMITTED<br><br>9/8/94                                                                   |



# U.S. DEPARTMENT OF AGRICULTURE

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## CERTIFICATION REGARDING DRUG-FREE WORKPLACE REQUIREMENTS (GRANTS) ALTERNATIVE I - FOR GRANTEE OTHER THAN INDIVIDUALS

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This certification is required by the regulations implementing Sections 5151-5160 of the Drug-Free Workplace Act of 1988 (Pub. L. 100-690, Title V, Subtitle D; 41 U.S.C. 701 et seq.), 7 CFR Part 3017, Subpart F, Section 3017.600, Purpose. The January 31, 1989, regulations were amended and published as Part II of the May 25, 1990 Federal Register (pages 21681-21691). Copies of the regulations may be obtained by contacting the Department of Agriculture agency offering the grant.

(BEFORE COMPLETING CERTIFICATION, READ INSTRUCTIONS ON PAGE 3)

### Alternative I

- A. The grantee certifies that it will or will continue to provide a drug-free workplace by:
- (a) Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the grantee's workplace and specifying the actions that will be taken against employees for violation of such prohibition;
  - (b) Establishing an ongoing drug-free awareness program to inform employees about --
    - (1) The dangers of drug abuse in the workplace;
    - (2) The grantee's policy of maintaining a drug-free workplace;
    - (3) Any available drug counseling, rehabilitation, and employee assistance programs; and
    - (4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace;
  - (c) Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph (a);
  - (d) Notifying the employee in the statement required by paragraph (a) that, as a condition of employment under the grant, the employee will --
    - (1) Abide by the terms of the statement; and
    - (2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;
  - (e) Notifying the agency in writing, within ten calendar days after receiving notice under subparagraph (d)(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position



title, to every grant officer on whose grant activity the convicted employee was working, unless the Federal agency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;

(f) Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph (d)(2), with respect to any employee who is so convicted --

(1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or

(2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;

(g) Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs (a), (b), (c), (d), (e) and (f).

B. The grantee may insert in the space provided below the site(s) for the performance of work done in connection with the specific grant:

Place of Performance (Street address, city, county, State, zip code)

City of Elgin

Check ☐ if there are workplaces on file that are not identified here.

Organization Name

City of Elgin

Award Number or Project Name

Name and Title of Authorized Representative

Randy L. McKone

MAYOR

Signature

Randy L. McKone

Date

9/8/94